

# Chemistry Tests: Clinical Interpretation

| Analyte                             | Clinical Interpretation  |
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| Alanine Transaminase (ALT) (SGPT)   | ▲ Liver disease (hepatocyte injury), hepatitis, drug therapy, biliary disease  |
| Albumin                             | ▲ Dehydration<br>▼ Liver disease, nephrotic syndrome, heart failure, low intake/ absorption of protein   |
| Alkaline Phosphatase                | ▲ Bone growth & disease, liver disease, malignancies in bone & liver, leukemia   |
| Aspartate Transaminase (AST) (SGOT) | ▲ Alcoholism, cirrhosis, hepatitis, drug therapy, biliary disease<br>▼ Uremia, B6 deficiency, drug therapy   |
| Bilirubin, Direct                   | ▲ Liver disease (hepatitis, cirrhosis, neoplasms), biliary disease, neonatal jaundice  |
| Bilirubin, Total                    | ▲ Liver disease (hepatitis, cirrhosis, neoplasm), alcoholism, hemolytic disease, biliary obstruction, neonatal jaundice, anorexia  |
| Calcium                             | ▲ Hyperparathyroidism, bone, lung, & breast cancer, bone resorption<br>▼ Low intake/absorption, vitamin D deficiency   |
| Carbon Dioxide                      | ▲ Respiratory acidosis, metabolic alkalosis<br>▼ Respiratory alkalosis, metabolic acidosis   |
| Chloride                            | ▲ Dehydration, metabolic acidosis<br>▼ Overhydration, respiratory acidosis, metabolic alkalosis  |
| Cholesterol                         | ▲ Coronary arterial occlusion, atherosclerosis, hypothyroidism<br>▼ Low intake/absorption, hematologic disorders   |
| Creatinine                          | ▲ Renal disease, insufficiency, low glomerular filtration<br>▼ Decreased muscle mass, severe liver disease   |
| Ferritin                            | ▲ Hemochromatosis, hematologic disorders, acute liver disease, leukemia, lymphoma, hepatocellular carcinoma<br>▼ Iron deficiency   |
| Gamma Glutamyltransferase (GGT)     | ▲ Biliary obstruction, cirrhosis, hepatitis, liver & pancreatic cancer, alcoholism   |
| Glucose                             | ▲ Diabetes<br>▼ Insulinoma   |
| High Density Lipoprotein (HDL)      | ▲ Estrogens, birth control pills, drug therapy<br>▼ Coronary atherosclerosis & heart disease, obesity, diabetes, uremia  |
| Iron                                | ▲ Hemochromatosis, hemolytic anemia, acute liver disease<br>▼ Iron deficiency anemia   |
| Lactate Dehydrogenase (LD)          | ▲ Neoplasms, hematologic disorders, myocardial, pulmonary & renal infarct, infectious mononucleosis  |
| Low Density Lipoprotein (LDL)       | ▲ Coronary atherosclerosis   |
| Magnesium                           | ▲ Renal failure, respiratory failure<br>▼ Seizures, tetany, cardiac arrhythmias, low Ca <sup>++</sup> & K <sup>+</sup>   |
| Phosphorus (Phosphate)              | ▲ Kidney stone, renal failure, acromegaly, hypoparathyroidism, bone metastasis<br>▼ Osteomalacia, hyperparathyroidism  |
| Potassium                           | ▲ Trauma, Addison's disease, acidosis, renal disease<br>▼ Primary aldosteronism, metabolic alkalosis, Cushing's syndrome, renal tubular disease                                  |
| Protein, Total                      | ▲ Dehydration<br>▼ Decreased intake/absorption, edema  |
| Sodium                              | ▲ Dehydration, Cushing's syndrome, aldosteronism<br>▼ Addison's disease, hypopituitarism, liver disease  |
| Total Iron Binding Capacity (TIBC)  | ▲ Iron deficiency<br>▼ Hemochromatosis   |
| Triglycerides                       | ▲ Atherosclerosis, coronary artery disease, diabetes, high carbohydrate intake, obesity, pancreatitis  |
| Urea Nitrogen, Blood                | ▲ Chronic renal disease, acute renal failure, ketoacidosis, dehydration, GI bleeding<br>▼ Late normal pregnancy, decreased protein intake, IV fluids, SIADH, severe liver damage |
| Uric Acid                           | ▲ Gout, kidney stone, inborn error of metabolism, diuretics, disseminated neoplasms, alcohol consumption, renal failure, hypertension  |

The above interpretive information is not all-inclusive and does not constitute nor should it be relied upon as medical advice. Abnormal levels may be observed in additional disorders. Test results should be interpreted in context of clinical signs and symptoms. Reference: Laboratory Test Handbook, 4th edition. Jacobs DS, Demott WR, Grady HJ, et al (eds.), Lexi-Comp Inc., Hudson, Ohio, 1996